

# Retail Food Inspection Report

Floyd County Health Department

Telephone (812) 948-4726

<b>Establishment Name</b> GET IT ON A BUN AT BOOTY'S (FOOD TRUCK/MOBIL	<b>Telephone Number</b> Est (812) 292-3800 Own 502-296-3848	<b>Date of Inspection</b> 05/19/2021	<b>ID#</b>		
<b>Address</b> 822 STATE ST, NEW ALBANY IN 47150	<b>Purpose</b> <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)	<b>Follow Up</b>	<b>Released</b>		
<b>Owner</b> TAMMY BOUTIETTE		<b>Menu Type</b> 1 _ 2 _ 3 <u>X</u> 4 _ 5 _			
<b>Owner's Address</b> 10650 BREWER'S POINT CT S.E. ELIZABETH, IN 47117					
<b>Person in Charge</b> TAMMY BOUTIETTE					
<b>Responsible Person's Email</b>					
<b>Certified Food Handler</b> TAMMY BOUTIETTE SYREE N BOUTIETTE CRAIG A BOUTIETTE					
CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRAIVE COLUMN MARKED AS "R"					
<b>Section #</b>	<b>C</b>	<b>NC</b>	<b>R</b>	<b>Narrative</b>	<b>To Be Corrected</b>
<b>Summary of Violations</b> C _____ NC _____ R _____					
Received by (name and title printed):			Inspected by (name and title printed): Thomas Snider CFS		
Received by (signature):			Inspected by (signature): <i>Thomas Snider</i>		
cc:		cc:		cc:	